ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 6 | 9-5-01 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

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| ✔ | ................................. | Rejected |
| = | ................................. | Allowed |
| — | (Through numeral)... | Canceled |
| ÷ | ................................. | Restricted |

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| N | ................................. | Non-elected |
| I | ................................. | Interference |
| A | ................................. | Appeal |
| O | ................................. | Objected |

| Claim (Final / Original) | Date | | Claim (Final / Original) | Date | | Claim (Final / Original) | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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